

**2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000010611

**Entity Name:** NEWKEY LENDING, LLC

**Current Principal Place of Business:**

175 TOWNPARK DR NW  
SUITE 435  
KENNESAW, GA 30144

**Current Mailing Address:**

175 TOWNPARK DR NW  
SUITE 435  
KENNESAW, GA 30144 US

**FEI Number:** 87-1584792

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

COGENCY GLOBAL INC.  
115 NORTH CALHOUN STREET, SUITE 4  
TALLAHASSEE, FL 32301 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

|                 |                                  |                 |                                  |
|-----------------|----------------------------------|-----------------|----------------------------------|
| Title           | MGR                              | Title           | CEO                              |
| Name            | BONADONA, CHAD M                 | Name            | BONADONA, CHAD M                 |
| Address         | 175 TOWN PARK DRIVE<br>SUITE 435 | Address         | 175 TOWN PARK DRIVE<br>SUITE 435 |
| City-State-Zip: | KENNESAW GA 30144                | City-State-Zip: | KENNESAW GA 30144                |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHAD BONADONA

CEO

04/08/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date